UAHPERD 2006 Convention Registration Form "Quality Programs for Every Body" November 11, 2006 — UVSC Campus

Name			
•			
Address			
•			
City	State	Zip	
•	•	•	
Home/Cell Phone	Office Phone		
Home/Cen I none	Office I none		
•	•		
Email (please print)			
•			
Affiliation (College, School District, University)			
•			
Other Affiliation (please specify)			
•			
Member Status (please check one)			
□ Professional (\$50.00) □ Full Time Student (\$20.00)			
To facilitate the blocking of rooms at the motel, please check the box below if you plan to stay overnight on Friday.			
☐ I plan to make a reservation at the Hampton Inn for Friday Nov. 10.			
To register, please complete the form and send it with your check by mail to the			
address below.			
address below.			
Amount Enclosed \$			
			
Make check to UAHPERD, and send by October 31, 2006 to:			

Bill Vincent, UAHPERD Treasurer ATTN Maggie Shibla 249 Smith Fieldhouse Brigham Young University Provo UT 84602-2212